

# Electronic Filing System (EFS) Data

## Electronic Patent Application Submission

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EFS ID: 13557  
Application ID: 09683541  
Title of Invention: SYSTEMS AND METHODS OF AUTOMATING JOB TICKETING IN PRINTING, COPYING OR IMAGING DEVICES  
First Named Inventor: Richard DIMPERIO  
Domestic/Foreign Application: Domestic Application  
Filing Date: null  
Effective Receipt Date: 2002-01-16   
Submission Type: Utility Patent Filing  
Filing Type: new-utility  
Confirmation Number: 0  
Attorney Docket Number: 109469  
Digital Certificate Holder: cn=Thomas J. Pardini, ou=Registered Attorneys, ou=Patent and Trademark Office, ou=Department of Commerce, o=U.S. Government, c=US  
Certificate Message Digest: 1nurrx8B8Y1U4cFrhTCw4Q==  
Total Fees Authorized: \$780.0  
  
Payment Category: DA – Deposit Account  
Deposit Account Number: 240037  
Deposit Account Name: Thomas J. Pardini

# TRANSMITTAL FORM

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09/683541  
01/16/02

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Stylesheet Version: 1.0

Attorney Docket  
Number:

109469

Submission Type: Utility Patent  
Filing

## SYSTEMS AND METHODS OF AUTOMATING JOB TICKETING IN PRINTING, COPYING OR IMAGING DEVICES

First Named Inventor: Richard DIMPERIO

### SUBMITTED BY

Name: Mr. Thomas J. Pardini  
Registration Number: 30411  
Electronic Signature Mark: /Thomas  
J. Pardini/ Date Signed: 20020116

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*I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.*

### Attached Files:

declaration dec1.tif

declaration	dec2.tif
declaration	dec3.tif
fee-transmittal	xx109469fee.xml
specification	109469ob.xml
bibd-transmittal	xx109469apds.xml
patent-assignments	xx109469asgn.xml

**Attached Image File(s):**

dec1.tif  
dec2.tif  
dec3.tif

**Comments:**

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**APPLICATION FOR UNITED STATES PATENT  
DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SYSTEMS AND METHODS OF AUTOMATING JOB TICKETING IN PRINTING, COPYING OR IMAGING DEVICES**

---

described and claimed in the specification:

Check one

\*a.  attached hereto.

b.  filed on \_\_\_\_\_ as Application No. \_\_\_\_\_ and amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year prior to this application are hereby claimed:

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

James A. Oliff, Registration No. 27,075; William P. Berridge, Registration No. 30,024;  
 Kirk M. Hudson, Registration No. 27,562; Thomas J. Pardini, Registration No. 30,411;  
 Edward P. Walker, Registration No. 31,450; Robert A. Miller, Registration No. 32,771;  
 Mario A. Costantino, Registration No. 33,565; Stephen J. Roe, Registration No. 34,463;  
 Joel S. Armstrong, Registration No. 36,430; Christopher W. Brown, Registration No. 38,025;  
 Richard E. Rice, Registration No. 31,560; Mark Costello, Registration No. 31,342;  
 Don L. Webber, Registration No. 34,275; Ronald F. Chapuran, Registration No. 26,402;  
 Eugene O. Palazzo, Registration No. 20,881; Kevin R. Kepner, Registration No. 32,145;  
 and/or Richard B. Domingo, Registration No. 36,784.

**ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.**

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1	<b>Typewritten Full Name of First or Sole Inventor</b>	Richard	R.	DIMPERIO
2	<b>**INVENTOR'S SIGNATURE:</b>	Given Name	Middle Initial	Family Name
3	<b>**DATE OF SIGNATURE:</b>	November	16	2001
Residence:	Rochester	NY	U.S.A.	Country
Citizenship:	U.S.A.	State or Province		
Post Office Address: (Insert complete	141 Cypress St.			

Page 2 OF U.S.A. DECLARATION FORM  
(Discard this page in a sole inventor application)

<b>1</b> <i>Typewritten Full Name of Second Joint Inventor (if any)</i>	<table border="0"> <tr> <td style="width: 33.33%;">Given Name</td> <td style="width: 33.33%;">W.</td> <td style="width: 33.33%;">Family Name</td> </tr> <tr> <td>Thomas</td> <td>W.</td> <td>BUSMIRE</td> </tr> </table>	Given Name	W.	Family Name	Thomas	W.	BUSMIRE
Given Name	W.	Family Name					
Thomas	W.	BUSMIRE					
<b>2</b> **INVENTOR'S SIGNATURE:							
<b>3</b> **DATE OF SIGNATURE:							
Residence:  Citizenship:	Victor  U.S.A.  Post Office Address: (Insert complete mailing address, including country)	NY  State or Province  604 Great Brook Apartments  Victor, NY 14564					
<b>1</b> <i>Typewritten Full Name of Third Joint Inventor (if any)</i>	<table border="0"> <tr> <td style="width: 33.33%;">Given Name</td> <td style="width: 33.33%;">M.</td> <td style="width: 33.33%;">Family Name</td> </tr> <tr> <td>Ann</td> <td>M.</td> <td>DAVIDSON</td> </tr> </table>	Given Name	M.	Family Name	Ann	M.	DAVIDSON
Given Name	M.	Family Name					
Ann	M.	DAVIDSON					
<b>2</b> **INVENTOR'S SIGNATURE:							
<b>3</b> **DATE OF SIGNATURE:							
Residence:  Citizenship:	Canandaigua  U.S.A.  Post Office Address: (Insert complete mailing address, including country)	NY  State or Province  3281 West Lake Road  Canandaigua, NY 14424					
<b>1</b> <i>Typewritten Full Name of Fourth Joint Inventor (if any)</i>	<table border="0"> <tr> <td style="width: 33.33%;">Given Name</td> <td style="width: 33.33%;">Middle Initial</td> <td style="width: 33.33%;">Family Name</td> </tr> <tr> <td>Allan</td> <td>J.</td> <td>DREW</td> </tr> </table>	Given Name	Middle Initial	Family Name	Allan	J.	DREW
Given Name	Middle Initial	Family Name					
Allan	J.	DREW					
<b>2</b> **INVENTOR'S SIGNATURE:							
<b>3</b> **DATE OF SIGNATURE:							
Residence:  Citizenship:	Walworth  U.S.A.  Post Office Address: (Insert complete mailing address, including country)	NY  State or Province  3869 Ontario Center Rd.  Walworth, NY 14568					
<b>1</b> <i>Typewritten Full Name of Fifth Joint Inventor (if any)</i>	<table border="0"> <tr> <td style="width: 33.33%;">Given Name</td> <td style="width: 33.33%;">Middle Initial</td> <td style="width: 33.33%;">Family Name</td> </tr> </table>	Given Name	Middle Initial	Family Name			
Given Name	Middle Initial	Family Name					
<b>2</b> **INVENTOR'S SIGNATURE:							
<b>3</b> **DATE OF SIGNATURE:							
Residence:  Citizenship:	Month  City  Post Office Address: (Insert complete	Day  State or Province  Year  Country					

Page 2 OF U.S.A. DECLARATION FORM  
(Discard this page in a sole inventor application)

<b>1</b>	<b>Typewritten Full Name of Second Joint Inventor (if any)</b>	Thomas	W.	BUSMIRE
		Given Name	Middle Initial	Family Name
<b>2</b>	<b>**INVENTOR'S SIGNATURE:</b>			
<b>3</b>	<b>**DATE OF SIGNATURE:</b>			
		Month	Day	Year
Residence:	Victor	NY	U.S.A.	
	City	State or Province	Country	
Citizenship:	U.S.A.			
Post Office Address: (Insert complete mailing address, including country)	604 Great Brook Apartments Victor, NY 14564			
<b>1</b>	<b>Typewritten Full Name of Third Joint Inventor (if any)</b>	Ann	M.	DAVIDSON
		Given Name	Middle Initial	Family Name
<b>2</b>	<b>**INVENTOR'S SIGNATURE:</b>			
<b>3</b>	<b>**DATE OF SIGNATURE:</b>			
		Month	Day	Year
Residence:	Canandaigua	NY	U.S.A.	
	City	State or Province	Country	
Citizenship:	U.S.A.			
Post Office Address: (Insert complete mailing address, including country)	3281 West Lake Road Canandaigua, NY 14424			
<b>1</b>	<b>Typewritten Full Name of Fourth Joint Inventor (if any)</b>	Allan	J.	DREW
		Given Name	Middle Initial	Family Name
<b>2</b>	<b>**INVENTOR'S SIGNATURE:</b>			
<b>3</b>	<b>**DATE OF SIGNATURE:</b>			
		Month	Day	Year
Residence:	Walworth	NY	U.S.A.	
	City	State or Province	Country	
Citizenship:	U.S.A.			
Post Office Address: (Insert complete mailing address, including country)	3869 Ontario Center Rd. Walworth, NY 14568			
<b>1</b>	<b>Typewritten Full Name of Fifth Joint Inventor (if any)</b>	Given Name	Middle Initial	Family Name
<b>2</b>	<b>**INVENTOR'S SIGNATURE:</b>			
<b>3</b>	<b>**DATE OF SIGNATURE:</b>			
		Month	Day	Year
Residence:				
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## FEE TRANSMITTAL

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*Patent fees are subject to annual revisions on or about October 1st of each year.*

## Large Entity

**TOTAL FEES AUTHORIZED: \$ 780**

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

**60** Deposit Account Number: 240037   
**60** Deposit Account Name: 240037

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

**Charge the Issue Fee Set in 37 C.F.R. Section 1.18 at the Mailing of the Notice of Allowance**

**Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).**

**SUBMITTED BY**

Authorized Name: Thomas J. Pardini  
Electronic Signature Mark: /Thomas J. Pardini/  
Date Signed: 20020116

**BASIC FILING FEE**

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	101	\$ 740

**Subtotal For Basic Filing Fee: \$ 740**

## **EXTRA CLAIM FEES**

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 4	103	\$ 18	0	\$ 0

Independent Claims: 2 | 102 | \$ 84 | 0 | \$ 0

**Subtotal For Extra Claims Fees: \$ 0**

## **ADDITIONAL FEES**

Fee Description	Number	Quantity	Fee Code	Amount	Fee Paid
Recording Each Patent Assignment Per Property Fee	00000000	1	581	\$ 40	\$ 40

**Subtotal For Additional Fees: \$ 40**